# OCT 1 5 2009

# 510(k) Summary

510(k) Number: <u>K091624</u>

**Date Prepared** 

May 29, 2009

**Submitter Information** 

Submitter's Name/Address:

Via Biomedical, Inc.

6655 Wedgwood Road Suite 150

Maple Grove, MN 55311

Contact Person:

Fernando Di Caprio President & CEO

(763) 577-9936 telephone

(763) 383-4711 fax

fdicaprio@viabiomedical.com

**Device Information** 

Trade Name:

Stent Graft Balloon Catheter

Common Name:

Catheter, Percutaneous

Classification Name:

Catheter, Percutaneous

Product Code:

DQY

Regulation:

Class II, 21 CFR 870.1250

Panel:

Cardiovascular

## Performance Standards

No performance standards applicable to this product have been developed under Section 514 of the Act.

## **Predicate Devices**

Predicate Device	Manufacturer	510(k) Status
Reliant Stent Graft Balloon Catheter	Medtronic, Inc.	K050038
Coda Balloon Catheter	Cook, Inc.	K032869
Equalizer Balloon Catheter	Boston Scientific, Inc.	K021721

May 29, 2009 000012

# **Device Description**

The Stent Graft Balloon Catheter is a multi-lumen catheter which has a compliant polyurethane balloon with a maximum diameter of 50mm. The device is available in two usable lengths, 65 cm and 100 cm. The device is designed to accommodate a 0.038" diameter or smaller guidewire. Two radiopaque marker bands are placed within the balloon to facilitate balloon placement prior to inflation. The device is a single use, sterile device.

#### Intended Use/Indications for Use

The Stent Graft Balloon Catheter is intended for temporary occlusion of large vessels, or to expand vascular prostheses.

### **Summary of Non-Clinical Testing**

The Stent Graft Balloon Catheter underwent mechanical, performance, and biocompatibility testing to verify that the device functions in a safe and effective manner. The results of the tests provide reasonable assurance that the device has been designed and tested to assure conformance to the requirements for its indications for use.

## Statement of Equivalence

The Stent Graft Balloon Catheter is substantially equivalent to the predicate devices listed above based on a comparison of the indications for use and the technological characteristics. The testing performed confirms that the Stent Graft Balloon Catheter will perform as intended.

May 29, 2009 000013



Food and Drug Administration 10903 New Hampshire Avenue Document Control Room W-066-0609 Silver Spring, MD 20993-0002

OCT 1 5 2009

Via Biomedical, Inc. C/O Fernando Di Caprio, President and CEO 6655 Wedgwood Road, Suite 150 Maple Grove, MN 55311

Re: K091624

Trade Name: Stent Graft Balloon Catheter Regulation Number: 21 CFR 870.1250 Regulation Name: Percutaneous Catheter

Regulatory Class: II

Product Code: DQY, MJN Dated: September 24, 2009 Received: September 25, 2009

Dear Mr. Di Caprio:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set

# Page 2 - Mr. Fernando Di Caprio

forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <a href="http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm">http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm</a> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Bram D. Zuckerman, M.D.

Director

Division of Cardiovascular Devices

prima R. Volhnis

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

510(k) Number (if known): <u>Kog16 24</u>

# **Indications for Use Statement**

Device Name: Stent Graft Balloon Catheter		
Indications for Use:		
The Stent Graft Balloon Catheter is intended for temporary occlusion of large vessels, or to expand vascular prostheses.		
Prescription Use AND/OR Over-The-Counter Use (21 CFR 801 Subpart C)		
(PLEASE DO NOT WRITE BELOW THIS LINE- CONTINUE ON ANOTHER PAGE IF NEEDED)		
Concurrence of CDRH, Office of Device Evaluation (ODE)		

May 29, 2009

510(K) Number K091624

(Division Sign-Off)
Division of Cardiovascular Devices